Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10727212

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
(Column 1) (Column 2)							TYPE				ENTITY	
TOTAL CLAIMS			68					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			68 minus 20=		- 48			XS 9=	434	OR	X\$18=	
INDEPENDENT CLAIMS				inus 3 =	6			X43=	258	OR	X86=	
М	JLTIPLE DEPEI	NDENT CLAIM P	RESENT		. ′			+145=		OR	+290=	
* 11	the difference	e in column 1 is	less than zo	ss than zero, enter "0" in column 2			ı	TOTAL	1075	OR	TOTAL	
CLAIMS AS AMENDED - PART II									_	_	OTHER	THAN
	•	(Column 1)		(Column 2) (Column 3)				SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CL A114	-		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	(.)
							L	TOTAL	<u> </u>		TOTAL	
	•	(2)					Α	DDIT. FEE	<u> </u>		ADDIT. FEE	
		(Column 1) I CLAIMS	r	(Colum		(Column 3)	_	-				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus _.	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	01.411.4	=		X43=.		OR	X86=	
	rinsi Phese	NTATION OF ML	LIPLE DEP	ENDENT	CLAIM	· [_]	T	+145=		OR	+290=	
								TOTAL ODIT. FEE		OR ,	TOTAL DDIT. FEE	
		٠										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMBI PREVIOU PAID FO	ST ER JSLY	PRESENT EXTRA	Ī	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=			X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							/,40-		OR	700-	
. 14	* If the entry in column 1 is less than the entry in column 2 write *0" in column 2									OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OR ADDIT. FEE												
1	ne mignest Num	ber Previously Paid	For (Total or	Independen	t) is the	nianest number	toung	in the ann	ropriate box	in colu	MN 1.	